

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number OR Correspondence address below

Name
Dr. Stephen Elston
ONTAIN CORPORATION

Address
1750 - 112th Avenue NE
Suite C-245

Bellevue City	Washington State	98004 ZIP
United States of America Country	425-688-7828 Telephone	425-688-7829 Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
-------------------------------------------	---------------------------

Inventor's Signature	2/1/2002 Date
-------------------------	------------------

Seattle Residence: City	Washington State	U.S.A. Country	American Citizenship
----------------------------	---------------------	-------------------	-------------------------

7031 2nd Avenue NW

Mailing Address

Seattle City	Washington State	98117 ZIP	U.S.A. Country
-----------------	---------------------	--------------	-------------------

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
-------------------------------------------	---------------------------

Inventor's Signature	1/31/02 Date
-------------------------	-----------------

Kirkland Residence: City	Washington State	U.S.A. Country	American Citizenship
-----------------------------	---------------------	-------------------	-------------------------

1510 7th Street

Mailing Address

Kirkland City	Washington State	98033 ZIP	U.S.A. Country
------------------	---------------------	--------------	-------------------

Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 3 of 3

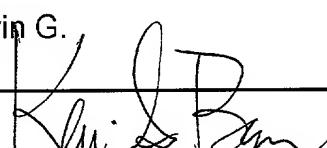
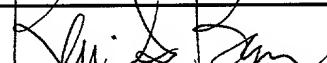
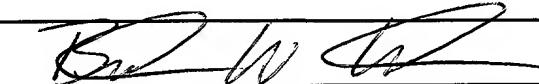
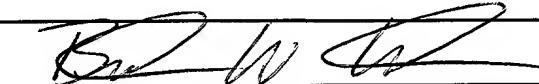
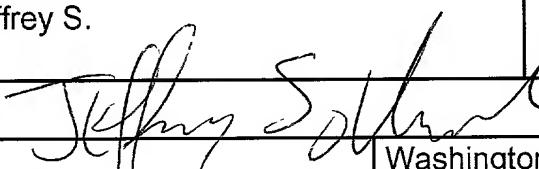
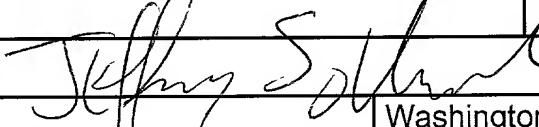
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name David H.		Family Name Edelstein	
Inventor's Signature 		Date 2/1/02	
Residence: City Seattle	State Washington	U.S.A. Country U.S.A.	American Citizenship
422-A NE Maple Leaf Place Mailing Address			
Mailing Address			
City Seattle	Washington State	98115 ZIP	U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Carman R.		Family Name Wenkoff	
Inventor's Signature 		Date Jan 31, 2002	
Residence: City Kirkland	State WA	Country USA	Citizenship Canadian
Mailing Address 1104 122nd W NE			
Mailing Address M-104			
City Kirkland	State WA	ZIP 98033	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

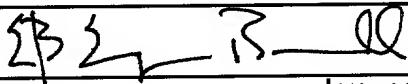
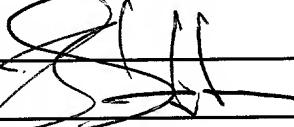
ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Kevin G. 	Family Name or Surname	Brown
Inventor's Signature			Date 1/31/02
Residence: City	Seattle	State	Washington U.S.A. Citizenship
1613 46th Avenue SW Mailing Address			
Mailing Address			
City	Seattle	State	Washington ZIP 98116 U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Brandon W. 	Family Name or Surname	Lonac
Inventor's Signature			Date 1/31/2002
Residence: City	Seattle	State	Washington U.S.A. Citizenship
525 NE 91st Street Mailing Address			
Mailing Address			
City	Seattle	State	Washington ZIP 98115 U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Jeffrey S. 	Family Name or Surname	Nemecek
Inventor's Signature			Date 1/31/2002
Residence: City	Bothell	State	Washington U.S.A. Citizenship
21208 9th Avenue SE Mailing Address			
Mailing Address			
City	Bothell	State	Washington ZIP 98021 U.S.A. Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Eugene		Family Name Brownell	
Inventor's Signature 		Date JAN 31, 2002	
Residence: City Redmond	State Washington	U.S.A. Country	American Citizenship
13402 NE 119th Way Mailing Address			
Mailing Address			
City Redmond	State Washington	ZIP 98052	U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Brent		Family Name Bolleman	
Inventor's Signature 		Date JAN 31/02	
Residence: City Redmond	State Washington	U.S.A. Country	Citizenship Canadian
7001 Old Redmond Road Mailing Address			
#I-336 Mailing Address			
City Redmond	State Washington	ZIP 98052	U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jason		Family Name Strashek	
Inventor's Signature 		Date JAN 31, 2002	
Residence: City Kirkland	State Washington	U.S.A. Country	Citizenship Canadian
11002 Forbes Creek Drive Mailing Address			
#R307 Mailing Address			
City Kirkland	State Washington	ZIP 98033	U.S.A. Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	
First Named Inventor	ELSTON, Stephen
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

REMOTE ORDERING SYSTEM FOR MOBILE COMMERCE

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]